

North Carolina Department of Insurance Office of State Fire Marshal 1202 Mail Service Center Raleigh, NC 27699-1202

Affidavit of Experience

The person providing you with this affidavit is requesting that you or your company certify their knowledge and experience with pyrotechnics. Of particular concern is your knowledge as to his or her prior compliance with all company policies, state and local laws and regulations governing the use of pyrotechnics. Please include any pertinent information as an attachment to this form.

Your cooperation is requested so the Office of State Fire Marshal can determine whether an applicant has the experience necessary to receive a Proximate Audience Pyrotechnic Operator's license. The applicant is required to verify that he or she meets all conditions necessary to take a Proximate Audience pyrotechnic operator's examination. This verification is accomplished through this affidavit detailing your knowledge of their experience. Please make sure this form is notarized.

Applicant Company Name	I certify	has been an employee/contractor for			
Company Name		Applicant			
			for the past	Years.	
on a total ofoccasions, with a total of assistants under his or her Number supervision has performed as an assistant operator for a total Applicant of before becoming an operator. On this day of 20, I certify under penalty of perjury that the foregoing true and correct. Signature of Owner/Officer of Company: ATF License # (if applicable): Street Address & City: Drivers License :		Company Name		Number	
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Printed name of notary:	o and subscribed before if	(l	Name of Principal)	Differs License	
				Printed name of notary:	

My Commission Expires:_